

Work Order ID 100482

\*100482\*

Page 1

April-22-13 1:41:25 PM

Item ID: D3913-7

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Rib

Stop

\*NS2\*

Start Date: 4/19/13 Start Qty: 8.00

\*8\*

Cust Item ID:

Required Date: 4/22/13 Req'd Qty: 8.00

\*8\*

Customer:

Reference:

Approvals: Process Plan: ML3

Date: 13-04-25 Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

| Draw Nbr | Revision Nbr |
|----------|--------------|
|----------|--------------|

|       |   |
|-------|---|
| D3913 | B |
|-------|---|

|     |      |
|-----|------|
| 100 | 0.00 |
|-----|------|

\*100\*

Large Fab

Memo

0.00

x12 13-07-09 MAC

Large Fab

1- Cut tube as per dwg D3913  
2- remove identification marks and deburr

|     |                                    |      |
|-----|------------------------------------|------|
| 110 | QC6- Inspect dimensions to drawing | 0.00 |
|-----|------------------------------------|------|

\*110\*

QC

Memo

0.00

Quality Control

12x SJ 13-07-09

|     |                                       |      |
|-----|---------------------------------------|------|
| 120 | Identify as per dwg & Stock Location: | 0.00 |
|-----|---------------------------------------|------|

\*120\*

Packaging

Memo

0.00

Packaging

SJ 13-07-09

NCR: Yes / No

## **WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: Date:

QA Closed: Date:

| Work Order: _____  |                          |      |      | DISPOSITION   |   | AGAINST DEPARTMENT/PROCESS         |   |             |                                      |              |   |  |
|--|--------------------------|------|------|---|---|------------------------------------|---|-------------|--------------------------------------|--------------|---|--|
|  |                          |      |      | Rework <input type="checkbox"/>   | Skid-tube <input type="checkbox"/>                  | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>  |             | Engineering <input type="checkbox"/> |              |   |  |
|  |                          |      |      | Scrap <input type="checkbox"/>  | Machining <input type="checkbox"/>                  | Small Fab <input type="checkbox"/> | Prod. Eng. Coor. <input type="checkbox"/>   |             | Quality <input type="checkbox"/>     |              |   |  |
|  |                          |      |      | Use-as-is <input type="checkbox"/>  | Thermoforming <input type="checkbox"/>              | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/>  |             | Other <input type="checkbox"/>       |              |   |  |
|  |                          |      |      | Work Order Update <input type="checkbox"/>  | Large Fab <input type="checkbox"/>                  | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>   |             |                                      |              |   |  |
| Root Cause   |                          | Date | Step | Qty   | Description of work order update or Non-conformance | Initial Chief Eng                  | Action Description  | Sign & Date | Verification                         | QC Inspector |   |  |
| Doc/Data   | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Equip/Tooling  | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Operator   | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Material   | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Setup  | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Other  | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Process  | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Supplier   | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Training   | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Unapproved   | <input type="checkbox"/> |      |      |   |   |                                    |   |             |                                      |              |   |  |
| FAULT CATEGORY   |                          |      |      |   |   |                                    |   |             |                                      |              |   |  |
| Landing Gear   |                          |      |      | General   |   |                                    |   |             |                                      |              |   |  |
| <input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |                          |      |      | <input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                                    | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |             |                                      |              |   |  |
|  |                          |      |      |   |   |                                    | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge  |             |                                      |              | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled |  |
|  |                          |      |      |   |   |                                    |   |             |                                      |              | <input type="checkbox"/> Other  |  |

Work Order ID 100482

\*100482\*

Page 2

April-22-13 1:41:25 PM

Item ID: D3913-7

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Rib

Stop

\*NS2\*

Start Date: 4/19/13 Start Qty: 8.00

\*8\*

Cust Item ID:

Required Date: 4/22/13 Req'd Qty: 8.00

\*8\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

\*130\*

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

13/7/10 JJ

Memo

0.00

PLB-07-10

NCR: Yes / No

## **WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| Work Order: _____            |      |      |     | DISPOSITION   |  | AGAINST DEPARTMENT/PROCESS                    |  |                                      |              |  |  |
|------------------------------|------|------|-----|---|--|---|--|--------------------------------------|--------------|--|--|
|                              |      |      |     | Rework <input type="checkbox"/>                     | Skid-tube <input type="checkbox"/>                       | Crosstube <input type="checkbox"/>            | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |              |  |  |
|                              |      |      |     | Scrap <input type="checkbox"/>                      | Machining <input type="checkbox"/>                       | Small Fab <input type="checkbox"/>            | Prod. Eng. Coor. <input type="checkbox"/>    | Quality <input type="checkbox"/>     |              |  |  |
|                              |      |      |     | Use-as-is <input type="checkbox"/>                  | Thermoforming <input type="checkbox"/>                   | Finishing <input type="checkbox"/>            | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |              |  |  |
|                              |      |      |     | Work Order Update <input type="checkbox"/>          | Large Fab <input type="checkbox"/>                       | Composite <input type="checkbox"/>            | Supplier <input type="checkbox"/>            |                                      |              |  |  |
| Root Cause                   | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng  | Action Description                            | Sign & Date                                  | Verification                         | QC Inspector |  |  |
| Doc/Data                     |      |      |     |   |  |   |  |                                      |              |  |  |
| Equip/Tooling                |      |      |     |   |  |   |  |                                      |              |  |  |
| Operator                     |      |      |     |   |  |   |  |                                      |              |  |  |
| Material                     |      |      |     |   |  |   |  |                                      |              |  |  |
| Setup                        |      |      |     |   |  |   |  |                                      |              |  |  |
| Other                        |      |      |     |   |  |   |  |                                      |              |  |  |
| Process                      |      |      |     |   |  |   |  |                                      |              |  |  |
| Supplier                     |      |      |     |   |  |   |  |                                      |              |  |  |
| Training                     |      |      |     |   |  |   |  |                                      |              |  |  |
| Unapproved                   |      |      |     |   |  |   |  |                                      |              |  |  |
| FAULT CATEGORY               |      |      |     |   |  |   |  |                                      |              |  |  |
| Landing Gear                 |      |      |     | General   |  |   |  |                                      |              |  |  |
| Bending                      |      |      |     | Bend <input type="checkbox"/>                       | Grain <input type="checkbox"/>                           | Ovalized <input type="checkbox"/>             | Pressure/Forced                              |                                      |              |  |  |
| Centre Not Concentric to O/S |      |      |     | BOM/Route <input type="checkbox"/>                  | Hardware <input type="checkbox"/>                        | Over/Under tolerance <input type="checkbox"/> | Temperature/Cure                             |                                      |              |  |  |
| Cracks                       |      |      |     | Broken/Damaged <input type="checkbox"/>             | Inspection Incomplete <input type="checkbox"/>           | Part Incorrect <input type="checkbox"/>       | Weld <input type="checkbox"/>                |                                      |              |  |  |
| Crushed/Crimped              |      |      |     | Burrs <input type="checkbox"/>                      | Instructions Incomplete/Unclear <input type="checkbox"/> | Part Lost/Missing <input type="checkbox"/>    | Wrong Stock Pulled <input type="checkbox"/>  |                                      |              |  |  |
| Cuffs                        |      |      |     | Contamination <input type="checkbox"/>              | Maintenance <input type="checkbox"/>                     | Part Moved <input type="checkbox"/>           |  |                                      |              |  |  |
| Heat Treat                   |      |      |     | Countersink <input type="checkbox"/>                | Mislabeled <input type="checkbox"/>                      | Positioned Wrong <input type="checkbox"/>     |  |                                      |              |  |  |
| Inspection Strip in Tube     |      |      |     | Cut Too Short <input type="checkbox"/>              | Misread <input type="checkbox"/>                         | Power Loss/Surge <input type="checkbox"/>     | Other <input type="checkbox"/>               |                                      |              |  |  |
| Ripples in Bend              |      |      |     | Drill Holes <input type="checkbox"/>                | Offset <input type="checkbox"/>                          |   |  |                                      |              |  |  |
| Torque Waves in Extrusion    |      |      |     | Drawing <input type="checkbox"/>                    | Out of Calibration <input type="checkbox"/>              |   |  |                                      |              |  |  |
| Turning Sequence             |      |      |     | Finish <input type="checkbox"/>                     | Out of Sequence <input type="checkbox"/>                 |   |  |                                      |              |  |  |
| Wave/Twist in Tube           |      |      |     | Folio <input type="checkbox"/>                      | Outside Dimensions <input type="checkbox"/>              |   |  |                                      |              |  |  |

# Picklist Print

April 22/13 1:41:25 PM

Page 1

Work Order ID: 100482

Parent Item: D3913-7

Parent Item Name: Rib

Start Date: 4/19/13

Required Date: 4/22/13

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP Rev:A new issue DD 10.03.19 verified by:EC  
DD verf:EC

IPP Rev:B 11.01.17 chg qc5 to 6

| Component Item ID/<br>Item Name   | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|-----------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| M304TS0.500W.049<br>Square Tubing |                        | Purchased     | No          |                     |                  | 100             | f                  | 1,065.9843     | 1.594       | 13.423158    |               |                |        |

| Location | Loc Qty     | Loc Code |
|----------|-------------|----------|
| WA006    | 1065.984331 |          |
| 118460   | 0.00001534  |          |
| 122938   | 224.3       |          |
| 123565   | 198.684316  |          |
| 125062   | 643         |          |

1125502

19.125<sup>1</sup>

13-07-09 MAL

NCR: Yes / No

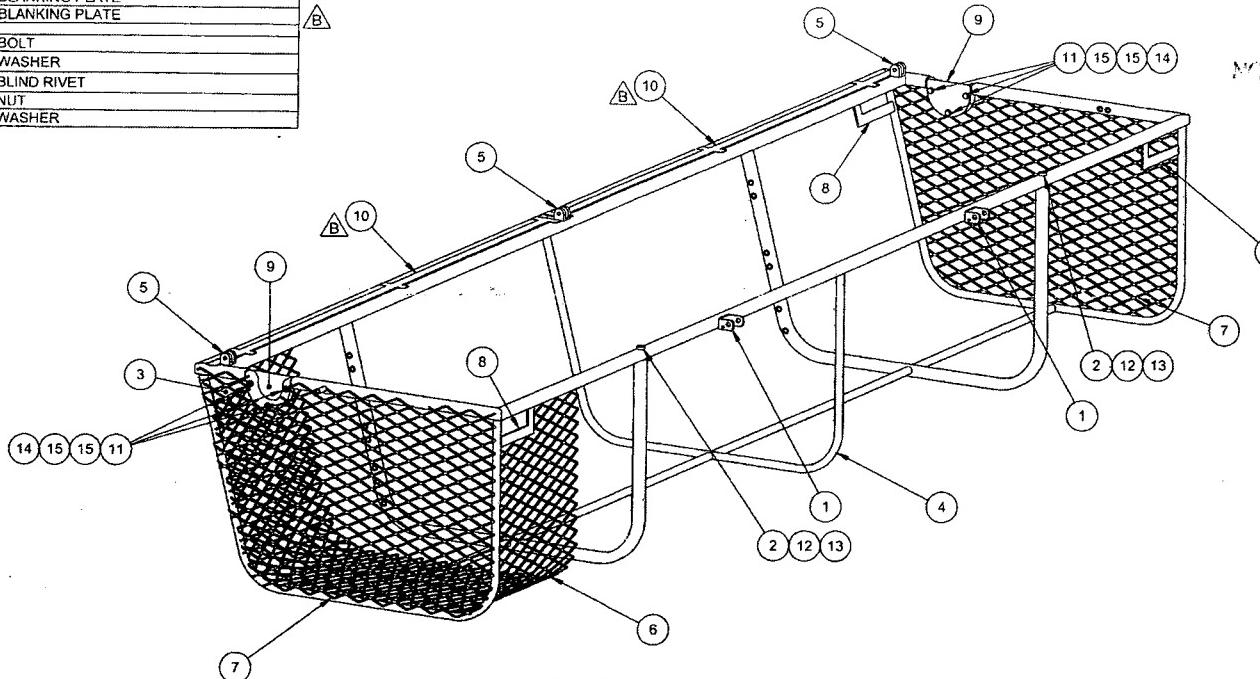
## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

| Work Order: _____  |      | DISPOSITION                     |                                |   | AGAINST DEPARTMENT/PROCESS                 |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
|--|------|---------------------------------|--------------------------------|---|--|------------------------------------|------------------------------------|---|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|------------------------------------|---|--|-----------------------------------|--------------------------------------|----------------------------------|--------------------------------|
|  |      | Rework <input type="checkbox"/> | Scrap <input type="checkbox"/> | Use-as-is <input type="checkbox"/>  | Work Order Update <input type="checkbox"/> | Skid-tube <input type="checkbox"/> | Machining <input type="checkbox"/> | Thermoforming <input type="checkbox"/>  | Large Fab <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Finishing <input type="checkbox"/> | Composite <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Prod. Eng. Coor. <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Supplier <input type="checkbox"/> | Engineering <input type="checkbox"/> | Quality <input type="checkbox"/> | Other <input type="checkbox"/> |
| Part No. _____   |      | NCR No. _____                   |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Root Cause   | Date | Step                            | Qty                            | Description of work order update or Non-conformance   |  | Initial Chief Eng                  | Action Description                 |   |                                    | Sign & Date                        | Verification                       |                                    | QC Inspector                       |                                    |   |  |                                   |                                      |                                  |                                |
| Doc/Data   |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Equip/Tooling  |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Operator   |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Material   |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Setup  |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Other  |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Process  |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Supplier   |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Training   |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Unapproved   |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| FAULT CATEGORY   |      |                                 |                                |   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| Landing Gear   |      |                                 |                                | General   |  |                                    |                                    |   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
| <input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |                                 |                                | <input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |  |                                    |                                    | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
|  |      |                                 |                                |   |  |                                    |                                    | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge  |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
|  |      |                                 |                                |   |  |                                    |                                    | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled   |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |
|  |      |                                 |                                |   |  |                                    |                                    | <input type="checkbox"/> Other  |                                    |                                    |                                    |                                    |                                    |                                    |   |  |                                   |                                      |                                  |                                |

| ITEM | QTY: | P/N           | DESCRIPTION                    |
|------|------|---------------|--------------------------------|
| 1    | 2    | D2581         | MOUNTING BRACKET               |
| 2    | 2    | D2931         | BUMPER                         |
| 3    | 1    | D3913-15      | WIDE HANDLE PLATE              |
| 4    | 1    | D3913-101     | TUBULAR ASSY (350 LONG BASKET) |
| 5    | 3    | D4016-1       | HINGE HALF, BASE               |
| 6    | 1    | D4020-1       | MESH (350 BASKET LONG BASE)    |
| 7    | 2    | D4020-11      | END MESH, BASKET               |
| 8    | 3    | D4021-1       | HANDLE PLATE                   |
| 9    | 2    | D4021-5       | BLANKING PLATE                 |
| 10   | 2    | D4672-1       | BLANKING PLATE                 |
| 11   | 6    | AN3-10A       | BOLT                           |
| 12   | 2    | AN960JD8      | WASHER                         |
| 13   | 2    | MS20600AD4W3  | BLIND RIVET                    |
| 14   | 6    | MS21042L3     | NUT                            |
| 15   | 12   | NAS1149F0332P | WASHER                         |



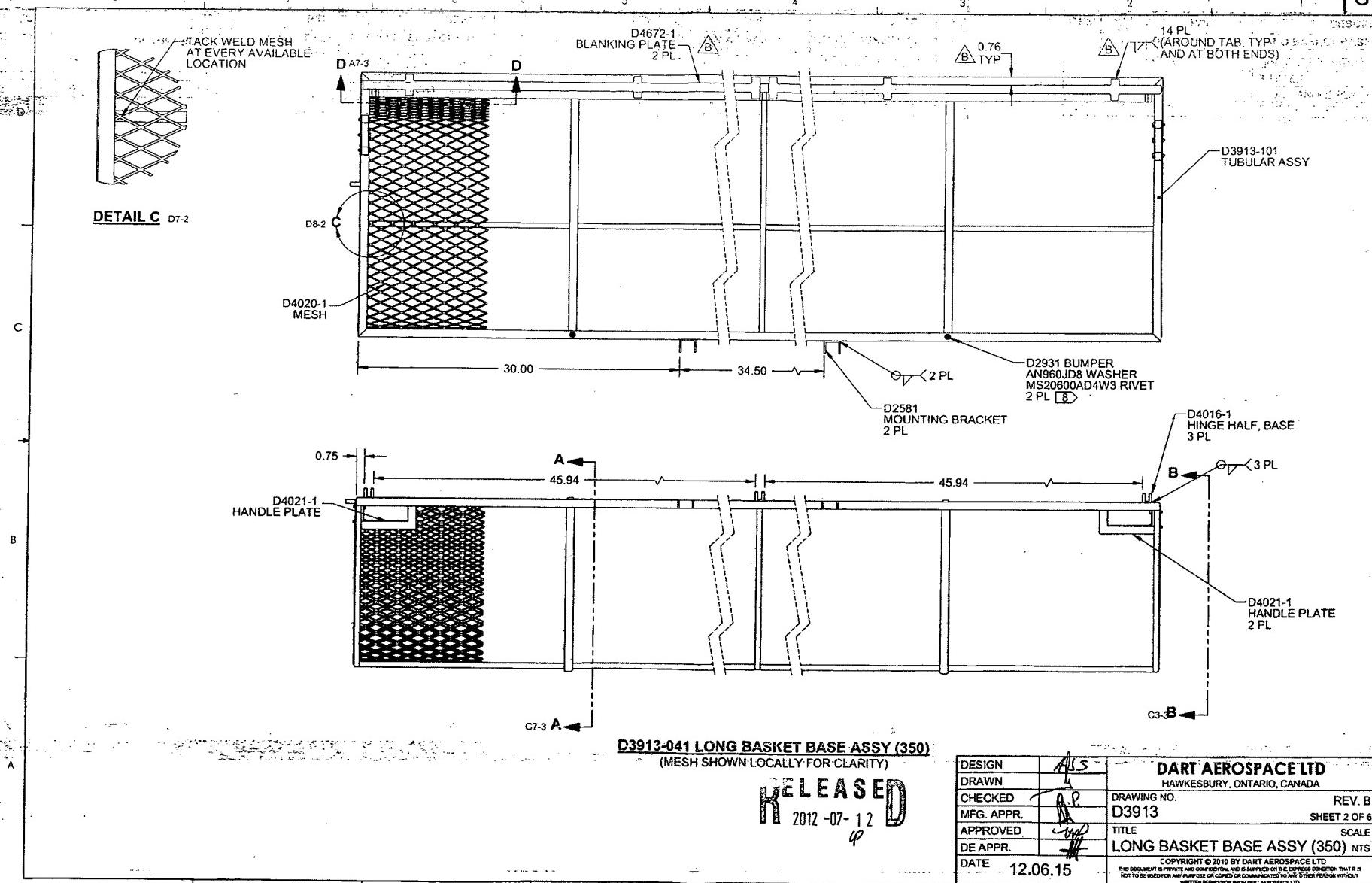
**D3913-041 LONG BASKET BASE ASSY (350)**  
(MESH SHOWN LOCALLY FOR CLARITY)

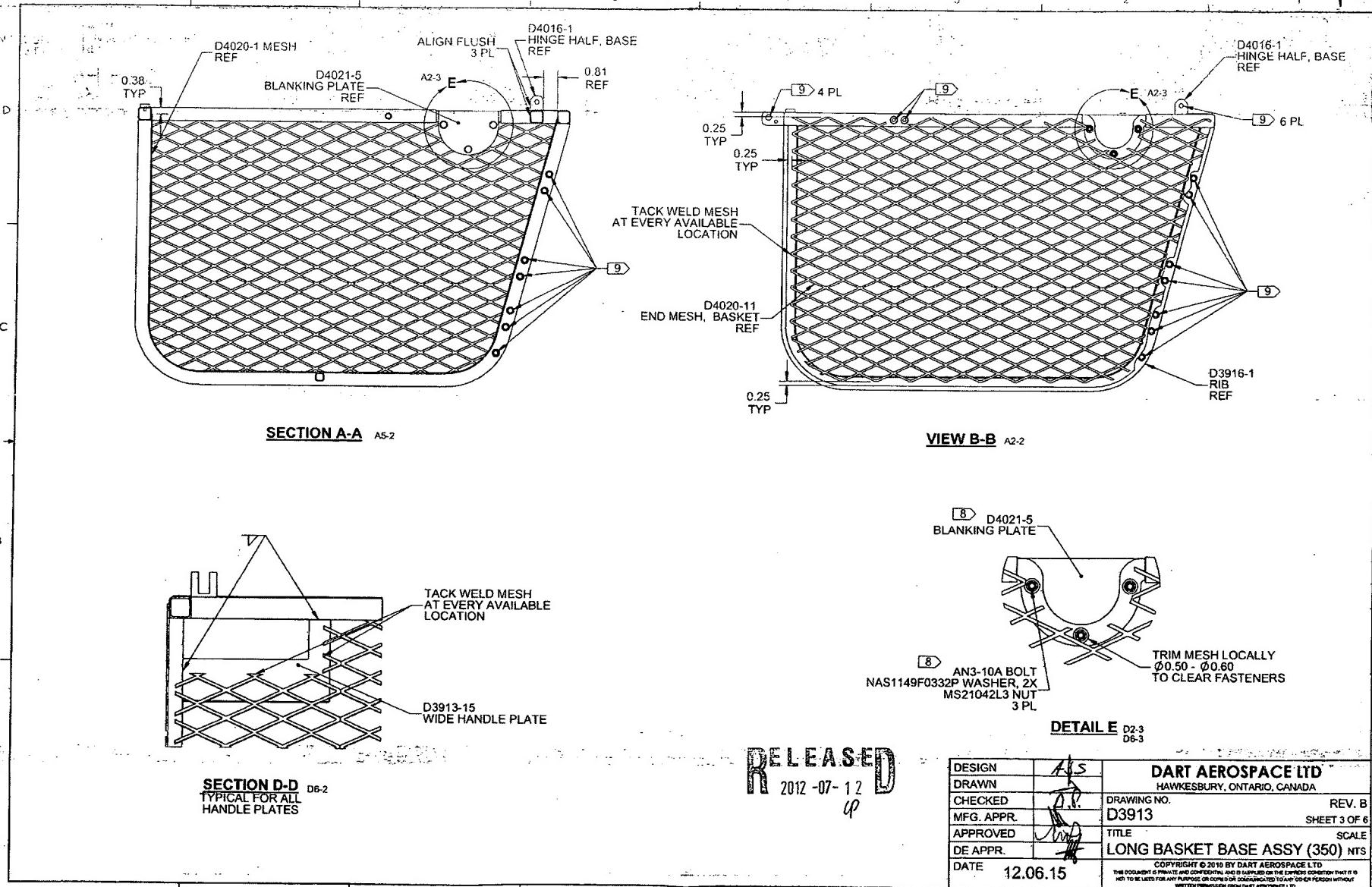
- NOTES:  
 1) MATERIAL: N/A  
 2) FINISH: POWDER COAT WHITE (4.3.5.2) PER DART QSI 005 4.3  
 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED  
 4) UNITS: INCHES UNLESS OTHERWISE NOTED  
 5) BREAK SHARP EDGES: N/A  
 6) IDENTIFICATION: NONE  
 7) WEIGHT: 43.9 lbs APPROX  
 8) INSTALL AFTER FINISH  
 9) MASK HOLES PRIOR TO POWDER COAT  
 10) WELD PER DART QSI 004

RELEASED  
2012-07-12  
JPN 12-6b

|            |  |   |              |
|------------|--|---|--------------|
| B          | ADD D4672-1 (ZN C4-1, C6-1, D2-2, D2-3, & D5-2). | MB  | 12.06.15     |
| A          | REASON: PAR12-197.                               | JPH   | 10.03.16     |
| REV.       | DESCRIPTION                                      | BY  | DATE         |
| DESIGN     | AS   | DART AEROSPACE LTD  |              |
| DRAWN      |  | HAWKESBURY, ONTARIO, CANADA   |              |
| CHECKED    | AP   | DRAWING NO.   | REV. B       |
| MFG. APPR. |  | D3913   | SHEET 1 OF 6 |
| APPROVED   | LADP   | TITLE   | SCALE        |
| DE APPR.   |  | LONG BASKET BASE ASSY (350) NTS   |              |
| DATE       | 12.06.15   | COPYRIGHT © 2012 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD.<br>IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT<br>WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |

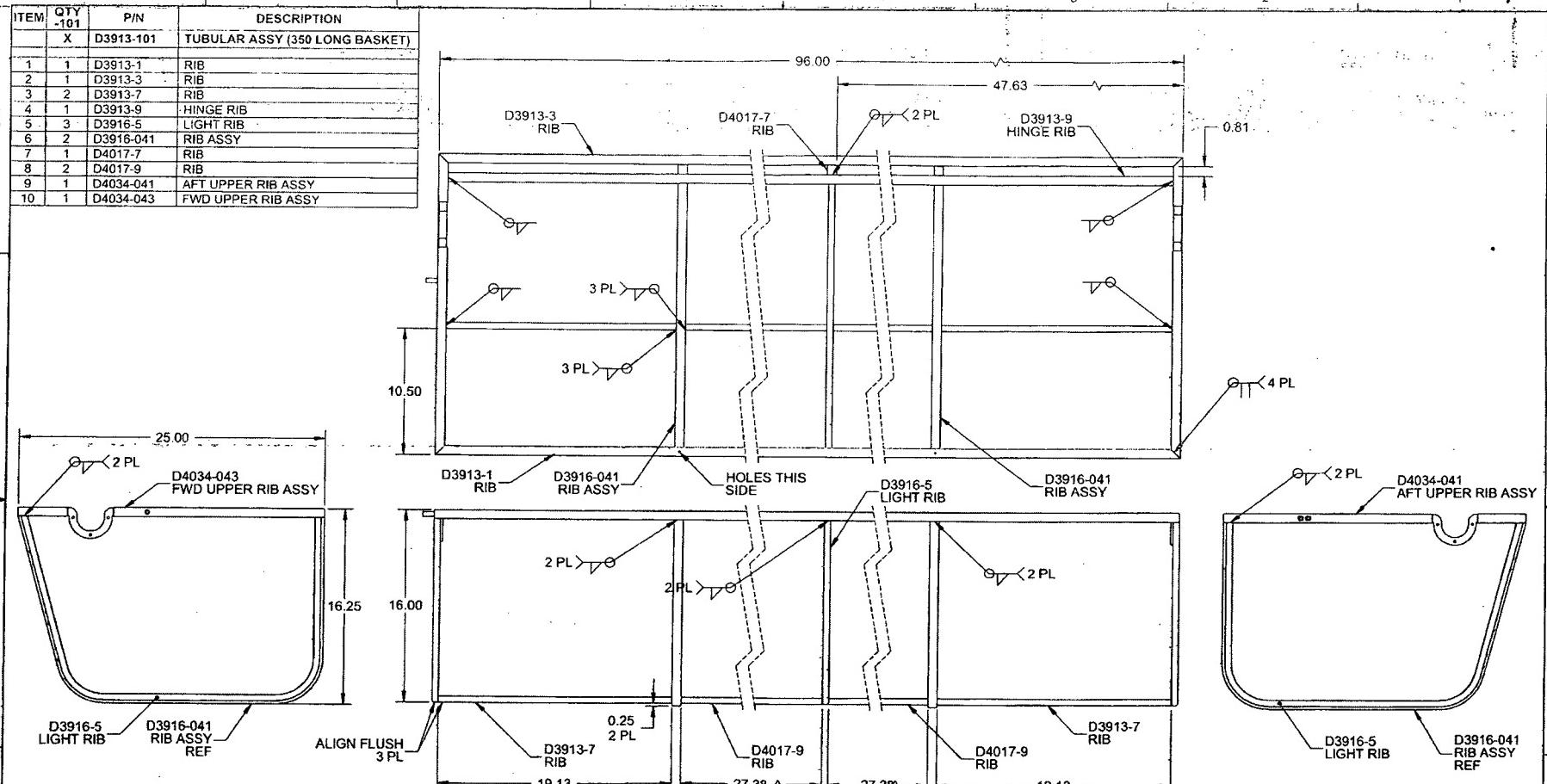
100482





100482

| ITEM | QTY  | P/N       | DESCRIPTION        |
|------|------|-----------|--------------------|
|      | -101 |           |                    |
| 1    | 1    | D3913-1   | RIB                |
| 2    | 1    | D3913-3   | RIB                |
| 3    | 2    | D3913-7   | RIB                |
| 4    | 1    | D3913-9   | HINGE RIB          |
| 5    | 3    | D3916-5   | LIGHT RIB          |
| 6    | 2    | D3916-041 | RIB ASSY           |
| 7    | 1    | D4017-7   | RIB                |
| 8    | 2    | D4017-9   | RIB                |
| 9    | 1    | D4034-041 | AFT UPPER RIB ASSY |
| 10   | 1    | D4034-043 | FWD UPPER RIB ASSY |



⑧ D3913-101 TUBULAR ASSY (350 SHORT BASKET)

NOTES:

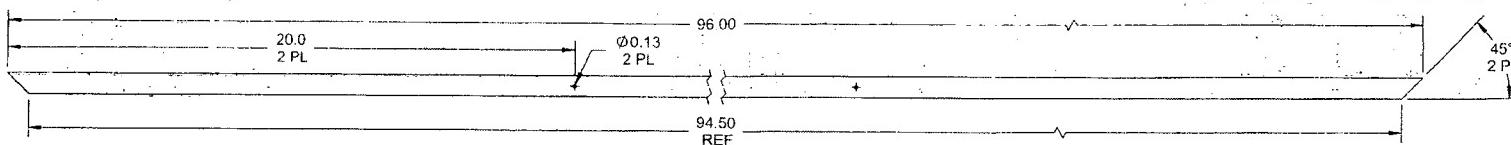
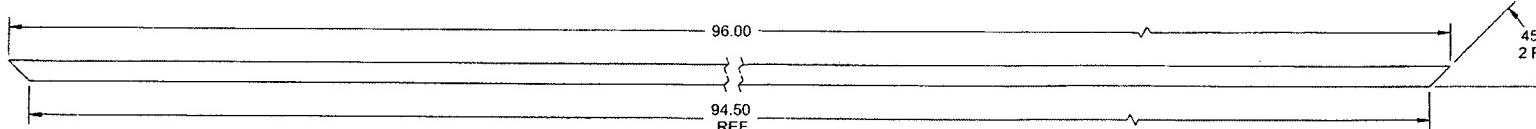
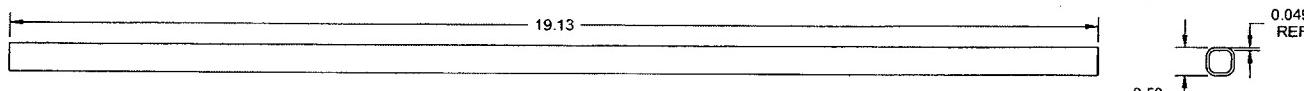
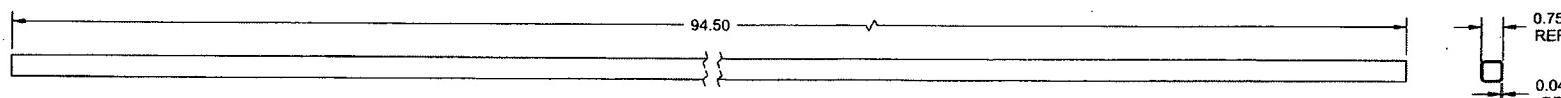
- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 22.53 lbs
- 8) TOLERANCE FOR XX.XX DIMENSIONS  $\pm 0.06$  FOR D3913-101
- 9) WELD PER DART QSI 004

RELEASED  
2012-07-12

|            |          |                                 |
|------------|----------|---------------------------------|
| DESIGN     | A.S.     | DART AEROSPACE LTD              |
| DRAWN      |          | HAWKESBURY, ONTARIO, CANADA     |
| CHECKED    | A.P.     | DRAWING NO.                     |
| MFG. APPR. |          | REV. B                          |
| APPROVED   |          | D3913                           |
| DE APPR.   |          | SHEET 4 OF 6                    |
| DATE       | 12.06.15 | TITLE                           |
|            |          | SCALE                           |
|            |          | LONG BASKET BASE ASSY (350) NTS |

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D3913-1 RIBD3913-3 RIBD3913-7 RIBD3913-9 HINGE RIB

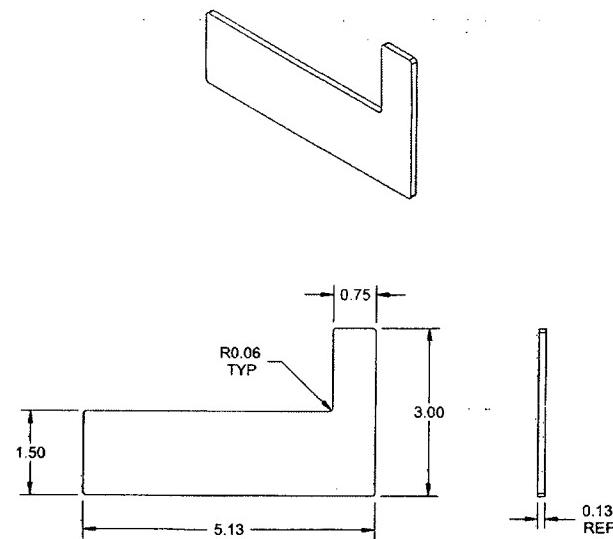
## NOTES:

- 1) MATERIAL -1, -3, -9. AISI 304/316 SEAMLESS STAINLESS STEEL SQUARE TUBE, 0.75 X 0.75 X 0.049 WALL  
PER ASTM A554 OR ASTM A269 MILL FINISH  
REF DART SPEC. M304TS0.75W0.049
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: SEE ASSEMBLED WEIGHTS

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2012-07-12  
*IP*

|            |           |   |
|------------|-----------|---|
| DESIGN     | <i>AS</i> | DART AEROSPACE LTD<br>HAWKESBURY, ONTARIO, CANADA |
| DRAWN      |           | DRAWING NO.                                       |
| CHECKED    | <i>TP</i> | REV. B  |
| MFG. APPR. |           | SHEET 5 OF 6                                      |
| APPROVED   | <i>ND</i> | TITLE   |
| DE APPR.   |           | SCALE   |
| DATE       | 12.06.15  | LONG BASKET BASE ASSY (350) NTS                   |

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WITHOUT PERMISSION FROM DART AEROSPACE LTD.

D3913-15 WIDE HANDLE PLATE

## NOTES:

- 1) MATERIAL: 304/316 STAINLESS STEEL SHEET ANNEALED 2B FINISH,  
PER MIL-S-5059 OR AMS 5513/5524 OR ASTM A240 OR ASME SA240  
REF DART SPEC M304S11GA
- 2) FINISH : NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.31 lbs

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2012-07-12  
CP

|            |            |   |
|------------|------------|---|
| DESIGN     | <i>Als</i> | DART AEROSPACE LTD  |
| DRAWN      | <i>S</i>   | HAWKESBURY, ONTARIO, CANADA   |
| CHECKED    | <i>AQ</i>  | DRAWING NO. REV. B  |
| MFG. APPR. | <i>M</i>   | D3913 SHEET 6 OF 6  |
| APPROVED   | <i>W</i>   | TITLE SCALE   |
| DE APPR.   | <i>W</i>   | LONG BASKET BASE ASSY (350) NTS   |
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